09/11/2008 12:27

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1.	NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT Sover the lines
	American College of Radiolo	
AD	DRESS (number and street)	1891 Preston White Drive
	Check if different than previously reported. (ACC)	Reston VA 20191
2.	FEC IDENTIFICATION NUM	BER ♥ CITY♠ STATE♠ ZIPCODE♠
	C00343459	3. IS THIS REPORT (N) OR X AMENDED (A)
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Non-electio Year Only) (MY) Termination Report(TER)	(c) 12-Day Primary (12P) General (12G) Runoff (12R) PRE-Election Report for the: Convention (12C) Special (12G) (d) 30-Day Post -Election General (30G) Runoff (30R) Special (30S) Report for the:
5.	Covering Period 0.2	2 01 2008 through 02 29 2008
l ce	ertify that I have examined this	Report and to the best of my knowledge and belief it is true, correct and complete.
Тур	oe or Print Name of Treasurer	DR Milton Guiberteau
Sig	nature of Treasurer Electro	nically Filed by DR Milton Guiberteau Date 0 9 1 1 2 0 0 8
NO	TE : Submission of false, error	neous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.
FE	Office Use Only	FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American College of Radiology Association D D " D 0 2 0.2 29 0 1 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 398231.39 January 1 (b) Cash on Hand at 538423.25 Begining of Reporting Period 66613.83 233730.21 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 605037.08 631961.60 6(a) and 6(c) for Column B) 142427.47 169351.99 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 462609.61 462609.61 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

^D 2 9

^y 0 0 8

Write or Type Committee Name
American College of Radiology Association

Report Covering the Period: From:

M M M 0 2 0 1 2 0 0 8 To:

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
	Contributions (other than loans) From: (a) Individuals/Persons Other			
	Than Political Committees (i) Itemized (use Schedule A)	53323.17	200258.77	
	(ii) Unitemized	12484.03	31681.58	
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	65807.20	231940.35	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00	
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	65807.20	231940.35	
	Transfers From Affiliated/Other Party Committees	0.00	0.00	
3. /	All Loans Received	0.00	0.00	
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00	
((Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00	
1	to Federal candidates and Other Political Committees	0.00	0.00	
	Other Federal Receipts (Dividends, Interest, etc.)	806.63	1789.86	
	Transfers from Non-Federal and Levin Funds			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00	
	(b) Levin Funds (from Schedule H5)	0.00	0.00	
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00	
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	66613.83	233730.21	
	Total Federal Receipts (subtract Line 18(c) from Line 19)	66613.83	233730.21	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 167000.00 141500.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 927.47 2351.99 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 142427.47 169351.99 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 142427.47 169351.99 from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	65807.20	231940.35
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	65807.20	231940.35
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any persone name and address of any political committee to ciation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. David Asinger Mailing Address 11330 Parkside Trl City Maple Grove FEC ID number of contributing federal political committee. Name of Employer Univ of Iowa Hosp & Clinics Receipt For: Primary General Other (specify)	State Zip Code MN 55369-9422 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Dr. Bernard Baier Mailing Address 5208 Ridge Rd City Minneapolis FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MN 55436-1079 C	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suburban Rådiólogy Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Dr. Steven Begich Mailing Address Suburban Radiologic 4801 W 81st St Ste 1 City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Suburban Rad Consultants Receipt For:		Date of Receipt M M
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	250.00	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/68 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation		
Full Name (Last, First, Middle Initial) Dr. Torrey Bergman			Date of Receipt
Mailing Address 2640 Joppa Ave S	M M / D D / Y Y Y Y Y O D D / Y 2008		
City	State	Zip Code	Transaction ID: 23430524
Saint Louis Park FEC ID number of contributing federal political committee.	C	55416-3932	Amount of Each Receipt this Period 250.00
Name of Employer Univ of Michigan	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Aaron Binstock			Date of Receipt
Mailing Address 17233 74th PI N			0 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Manla Crava	State Zip Code MN 55311-2733		Transaction ID: 23430525
Maple Grove FEC ID number of contributing federal political committee.	C	33311-2733	Amount of Each Receipt this Period 250.00
Name of Employer Mayo Clinic	Occupatio	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Shannon Bownds			Date of Receipt
Mailing Address Surburban Radiolo 4801 W 81st St Ste			0 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State		Zip Code 55437-1111	Transaction ID: 23430572
Minneapolis FEC ID number of contributing federal political committee.	C	33437-1111	Amount of Each Receipt this Period 250.00
Name of Employer Mount Auburn Hospital-Har- vard Me		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
American College of Radiology Associ	ation	
Full Name (Last, First, Middle Initial) Dr. Eric Bressler		Date of Receipt
Mailing Address 2465 Crowne Hill Road City	State Zip Code	0 2 0 7 2 0 0 8 Transaction ID: 23430573
Minnetonka	MN 55305-2258	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu- Itants Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Richard Carlson		Date of Receipt
Mailing Address 7020 Kerry Rd	02 7 7 2008	
City	State Zip Code	Transaction ID: 23430574
<u>Edina</u>	MN 55439-1746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Bradley Close		Date of Receipt
Mailing Address 1214 Wildhurst Trail		02 / 07 / 2008
City	State Zip Code	Transaction ID: 23430575
Mound	MN 55364-9643	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Univ of Michigan	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	· ·	

SCHEDULE A (FEC Form 3X)

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commerci	copied from such Reports and St al purposes, other than using the COMMITTEE (In Full) College of Radiology Associa	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Dr. Peter Cor Mailing Addr City Eden Prair FEC ID num federal politic Name of Em Suburban R Receipt For: Primar	rie ber of contributing cal committee. ployer adiology General		Zip Code 55347-4953 on tic Radiologist e Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (L Dr. Andrew C Mailing Addr City Minneapol FEC ID num	ess Suburban Radiologic C 4801 W 81st St Ste 10		Zip Code 55437-1191	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Itants Receipt For: Primar	àdiólogic Consu-		tic Radiologist e Year-to-Date ▼ 250.00]
Dr. Sue Croo Mailing Addr City Minneapol FEC ID num	ess Suburban Radiologic C 4801 W 81st St Ste 108		Zip Code 55437-1191	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Em Suburban R Receipt For: Primar Other	ādiōlogy		tic Radiologist e Year-to-Date ▼ 250.00	
SUBTOTAL of	Receipts This Page (optional))	750.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 10 / 68 (check only one) X 11a
or for	formation copied from such Reports and commercial purposes, other than using to the COMMITTEE (In Full)	Statements may not be ne name and address o	sold or used by any person f any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ar	merican College of Radiology Asso	ciation		
Dr.	II Name (Last, First, Middle Initial) . Ronald DeCesare ailing Address 6809 Pajute Dr			Date of Receipt
	3 333 . 4.4.3 2 .	Stata 7	n Codo	02 07 2008
Cit <u>Ec</u>	y dina		p Code 5439-1032	Transaction ID: 23430579 Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		250.00
Na Fa al	me of Employer irview Southdale Hospit-	Occupation Diagnostic Rac	liologist	
Re	ceipt For: Primary General Other (specify)	Aggregate Year-t	o-Date ▼ 250.00	
	II Name (Last, First, Middle Initial) . Tore Detlie			Date of Receipt
Ma	ailing Address 918 Demont Ave E	0 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Zip Code			Transaction ID: 23430580
	aplewood	MN 5	5109-1953	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	С		250.00
Su	me of Employer burban Radiologic Consu- nts	Occupation Diagnostic Rac	liologist	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 250.00	
	II Name (Last, First, Middle Initial) Daniel Eurman			Date of Receipt
Ма	siling Address Suburban Radiologic 4801 W 81st St Ste			02 07 2008
Cit	y inneapolis		p Code 5437-1191	Transaction ID: 23430581
FE	C ID number of contributing deral political committee.	C	0457-1191	Amount of Each Receipt this Period 250.00
Su	me of Employer iburban Radiologic Consu- nts	Occupation Radiologist		
	eceipt For:	Aggregate Year-t	o-Date ▼	
	Primary General Other (specify) ▼	0 0 0	250.00	
				750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 68 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ		
Full Name (Last, First, Middle Initial) Dr. Mary Foshager		Date of Receipt
Mailing Address 4248 Queen Ave S		02 07 2008
City	State Zip Code	Transaction ID: 23430767
Minneapolis	MN 55410-1614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Univ of Minnesota Hosp & Clnc	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Frerichs		Date of Receipt
Mailing Address 685 Shadyview Ln N	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 23430768
<u>Minneapolis</u>	MN 55447-3675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mayo Clinic	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00]
Full Name (Last, First, Middle Initial) Dr. Kevin Gustafson	I	Date of Receipt
Mailing Address 8803 Cove Pointe Rd		0 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23430769
Eden Prairie	MN 55347-2429	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consl- ts	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00]
		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation	
Full Name (Last, First, Middle Initial) Dr. Dwight Hager Mailing Address Suburban Radiolog	1. O	Date of Receipt
Mailing Address Suburban Radiolog 4801 W 81st St Ste		02 07 2008
City	State Zip Code	Transaction ID: 23430770
Minneapolis	MN 55437-1191	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu-	Occupation	
Itants	Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	1
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Dr. Joel Halcomb		Date of Receipt
Mailing Address 2583 Tournament I	02 07 2008	
City	Transaction ID: 23430771	
Blaine	MN 55449-5500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Univ of Wisconsin Hosp & Clinic	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Hatfield		Date of Receipt
Mailing Address 875 Partenwood Lr	1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23431420
Orono	MN 55356-9778	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer UT-Houston Medical School	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUPTOTAL of Descripts This Description	<u> </u>	750.00
SUBTUTAL OF RECEIPTS This Page (options	ı)	
TOTAL This Period (last page this line num	ber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 68 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associ	ation		
Full Name (Last, First, Middle Initial) Dr. Michael Heaney			Date of Receipt
Mailing Address 11362 Parkside Trl			02 07 2008
City	State	Zip Code	Transaction ID: 23431421
Maple Grove	MN	55369-9422	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Suburban Radiologic Consu-	Occupation		
Itants		ic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Lanning Houston	<u> </u>		Date of Receipt
Mailing Address 18 N Deep Lake Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23431422
Saint Paul	MN	55127-6506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Suburban Radiologic Consu- Itants	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. David Jose			Date of Receipt
Mailing Address 14 Larkspur Ln			02 07 2008
City	State	Zip Code	Transaction ID: 23431423
North Oaks	MN	55127-2006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Suite 108	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 68 (check only one) X		
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
Full Name (Last, First, Middle Initial) Dr. Patrick Juenemann Mailing Address 10976 Mississppi Dr City	State	Zip Code	Date of Receipt 0 2 0 7 2 0 0 8 Transaction ID: 23431424		
Champlin FEC ID number of contributing federal political committee.	C	55316-3504	Amount of Each Receipt this Period 250.00		
Name of Employer Suburban Radiologic Consultants Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n cic Radiologist e Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Todd Kihne Mailing Address 11683 Welters Way	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	City State Zip Code				
Eden Prairie					
FEC ID number of contributing federal political committee.			250.00		
Name of Employer Emory Univ Hospital		ic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Kenneth Korte			Date of Receipt		
Mailing Address 12613 Riverview Rd	Mailing Address 12613 Riverview Rd				
City	State	Zip Code	Transaction ID: 23431426		
Eden Prairie	MN	55347-4610	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.			250.00		
Name of Employer Suburban Radiology					
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (optional))		750.00		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 68 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the commercial purposes.	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	13 14 15 16 0 16 0 17 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full) American College of Radiology Asso		
Full Name (Last, First, Middle Initial) Dr. Bradley Kranendonk		Date of Receipt
Mailing Address 5170 Kelsey Ter		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23431427
<u>Edina</u>	MN 55436-1173	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu- Itants	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Alan Laorr	1	Date of Receipt
Mailing Address 15547 Sweetwater C	ir	02 07 2008
City	State Zip Code	Transaction ID: 23431428
Eden Prairie	MN 55347-2430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu-	Occupation	
Itants	Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	,
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Lorraine LaRoy		Date of Receipt
Mailing Address 2701 Crescent Ridge	e Rd	02 07 2008
City	State Zip Code	Transaction ID: 23431429
<u>Minnetonka</u>	MN 55305-2809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu- Itants	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		750.00

Full Name (Dr. Kevin Le Mailing Add City Dellwood FEC ID nur federal polit Name of En Suburban F Itants Receipt For Prima Other Full Name (Dr. Steven L Mailing Add City Eden Prai FEC ID nur federal polit Name of En Suburban F Itants Receipt For Prima Other Full Name (Dr. Daniel Lo Mailing Add City Mailing Add City City Minneapo	COMMITTEE (In Full) College of Radiology Assoc (Last, First, Middle Initial) Coach Chress 6 High Point Rd Committee Committee. Committee Committee Consulting Committee C	State Zip Code MN 55110-6176 C Occupation	Date of Receipt Date of Receipt
Full Name (Dr. Kevin Le Mailing Add City Dellwood FEC ID nur federal polit Name of En Suburban F Itants Receipt For Prima Other Full Name (Dr. Steven L Mailing Add City Eden Prai FEC ID nur federal polit Name of En Suburban F Itants Receipt For Prima Other Full Name (Dr. Daniel L Mailing Add City Minneapo	(Last, First, Middle Initial) each dress 6 High Point Rd mber of contributing tical committee. mployer Radiologic Consu-	State Zip Code MN 55110-6176 C Occupation	Transaction ID: 23431430 Amount of Each Receipt this Period
Dr. Kevin Le Mailing Add City Dellwood FEC ID nur federal polit Name of En Suburban F Itants Receipt For Other Full Name (Dr. Steven L Mailing Add City Eden Prai FEC ID nur federal polit Name of En Suburban F Itants Receipt For Prima Other Full Name (Dr. Daniel Le Mailing Add City Minneapo	mber of contributing tical committee. mployer Radiologic Consu-r:	MN 55110-6176 C Occupation	Transaction ID: 23431430 Amount of Each Receipt this Period
City Dellwood FEC ID nur federal polit Name of En Suburban Fltants Receipt For Prima Other Full Name (Dr. Steven L Mailing Add City Eden Praid Name of En Suburban Fltants Receipt For Prima Other Full Name (Dr. Daniel Long Dr. Daniel Long Daniel Long Dr. Dani	mber of contributing tical committee. mployer Radiologic Consu-	MN 55110-6176 C Occupation	Transaction ID: 23431430 Amount of Each Receipt this Period
Dellwood FEC ID nur federal polit Name of En Suburban F Itants Receipt For Other Full Name (Dr. Steven L Mailing Add City Eden Praifederal polit Name of En Suburban F Itants Receipt For Prima Other Full Name (Dr. Daniel Lo Mailing Add City Mailing Add City Minneapo	mber of contributing tical committee. mployer Radiologic Consu-	MN 55110-6176 C Occupation	Amount of Each Receipt this Period
FEC ID nur federal polit Name of Er Suburban F Itants Receipt For Other Full Name (Dr. Steven L Mailing Add City Eden Prail Name of Er Suburban F Itants Receipt For Prima Other Full Name (Dr. Daniel Lo Mailing Add City Minneapo	mber of contributing tical committee. mployer Radiologic Consu-	Occupation	
Full Name of Ersuburban Full Name (Dr. Steven LMailing Add City Eden Prail Name of Ersuburban Flants Receipt For Prima Other	mployer Radiologic Consu-	Occupation	250.00
Full Name (Dr. Steven L Mailing Add City Eden Prai FEC ID nurfederal polit Name of En Suburban Fitants Receipt For Prima Other	r:	•	—
Full Name (Dr. Steven L Mailing Add City Eden Prai FEC ID nurfederal polit Name of En Suburban Fitants Receipt For Prima Other	r:		
Full Name (Dr. Steven LMailing Add City Eden Praimants Receipt For Prima Other Full Name (Dr. Daniel LMailing Add City Minneapo		Diagnostic Radiologist	_
Dr. Steven L Mailing Add City Eden Praif FEC ID nur federal polit Name of Er Suburban F Itants Receipt For Prima Other Full Name (Dr. Daniel Le Mailing Add City Minneapo	ary General r (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
City Eden Prair FEC ID nur federal polit Name of Er Suburban F Itants Receipt For Prima Other Full Name (Dr. Daniel Lo Mailing Add City Minneapo	(Last, First, Middle Initial)		Date of Receipt
Eden Prair FEC ID nur federal polit Name of En Suburban Filtants Receipt For Other Full Name (Dr. Daniel Lo Mailing Add City Minneapo			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Eden Prair FEC ID nur federal polit Name of En Suburban Filtants Receipt For Other Full Name (Dr. Daniel L. Mailing Add City Minneapo		State Zip Code	Transaction ID: 23431431
Name of Er Suburban F Itants Receipt For Other Full Name (Dr. Daniel Lo Mailing Add	irie	MN 55347-5018	Amount of Each Receipt this Period
Full Name (Dr. Daniel Li Mailing Add	mber of contributing tical committee.	C	250.00
Full Name (Dr. Daniel Le Mailing Add City Minneapo	mployer Radiologic Consu-	Occupation Diagnostic Radiologist	
Dr. Daniel Le Mailing Add City Minneapo		Aggregate Year-to-Date ▼ 250.00	
City Minneapo	(Last, First, Middle Initial) oes	<u>I</u>	Date of Receipt
<u>Minneapo</u>	dress Suburban Radiologic (4801 W 81st St Ste 10	Consultants 18	0 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		State Zip Code	Transaction ID: 23431432
FFC ID nur	olis	MN 55437-1191	Amount of Each Receipt this Period
	mber of contributing tical committee.	C	250.00
<u>ltants</u>	Rádiólogic Consu-	Occupation Diagnostic Radiologist	
Receipt For		Aggregate Year-to-Date ▼	1
Other	arv i raenerai	250.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		not be sold or used by any personers of any political committee to	
American College of Radiology Associ	iation		
Full Name (Last, First, Middle Initial) Dr. Suzanne Moffit			Date of Receipt
Mailing Address 10906 Tanglewood Ln	N		02 07 2008
City	State	Zip Code	Transaction ID: 23431433
Champlin	MN	55316-3056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Hush Radiology	Occupation		
Receipt For:	+	c Radiologist	_
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Kent Molde	1		Date of Receipt
Mailing Address 6961 Beach Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23431434
Eden Prairie	MN	55344-5227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Riverside Medical Center	Occupation Diagnostic	c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Scott Nielsen			Date of Receipt
Mailing Address 2751 104th Ct NE			02 07 2008
City	State	Zip Code	Transaction ID: 23431435
Blaine	MN	55449-5055	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Mayo Clinic	Occupation Diagnostic	c Radiologist	
Receipt For: Primary General Other (specify) ▼	, · · · · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	Statements may not be sold or used by any person e name and address of any political committee to station	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Olsen		Date of Receipt
Mailing Address 4720 Medina Lake Dr		02 07 2008
City	State Zip Code	Transaction ID: 23431436
<u>Medina</u>	MN 55340-4609	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu-	Occupation	1
Itants Receipt For:	Diagnostic Radiologist	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Chris Palaskas	1	Date of Receipt
Mailing Address 2389 Cherrywood Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23431437
<u>Minnetonka</u>	MN 55305-2314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu- Itants	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Phelan	<u> </u>	Date of Receipt
Mailing Address 3944 Joppa Ave S		M M / D D / Y Y Y Y Y Y O D D / Z O O 8
City	State Zip Code	Transaction ID: 23431438
Saint Louis Park	MN 55416-5064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu- Itants	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation	
Full Name (Last, First, Middle Initial) Dr. J Joshua Plorde		Date of Receipt
Mailing Address 11616 Mississippi Dr N City	State Zip Code	02 07 2008
<u>Champlin</u>	MN 55316-2509	Transaction ID: 23431439 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mayo Clinic	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Nihar Shah		Date of Receipt
Mailing Address 2460 Thoroughbred Ln		02 07 2008
City	State Zip Code	Transaction ID: 23431440
Orono	MN 55356-9460	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mayo Clinic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. H Spaeth, JR		Date of Receipt
Mailing Address 6881 Beach Rd		02 07 2008
City	State Zip Code	Transaction ID: 23431441
Eden Prairie	MN 55344-5228	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu- Itants	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SURTOTAL of Receipts This Page (antional)		750.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso le name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associ	ciation	
Full Name (Last, First, Middle Initial) Dr. Kendall Strand Mailing Address 8581 Tigua Ln		Date of Receipt
City	State Zip Code	0 2 0 0 7 2 0 0 8 Transaction ID: 23431442
Chanhassen	MN 55317-9615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ltd	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Brian Sullivan		Date of Receipt
Mailing Address 2250 Veterans Memo		02 / 07 / 2008
City	State Zip Code	Transaction ID: 23431443
Andover	MN 55304-6067	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Medical College of Wiscon- sin	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Richard Thompson		Date of Receipt
Mailing Address 7001 Tupa Dr		02 07 2008
City	State Zip Code	Transaction ID: 23431444
<u>Edina</u>	MN 55439-1643	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiology Consul- tants	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 68 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any person the name and address of any political committee to sold ciation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Tuohy Mailing Address 6 Crocus Ln		Date of Receipt
Walling Address & Crocus Eff		02 07 2008
City	State Zip Code	Transaction ID: 23431445
Saint Paul FEC ID number of contributing federal political committee.	MN 55127-6302	Amount of Each Receipt this Period 250.00
Name of Employer Suburban Radiologic Consultants Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Mark Wilson		Date of Receipt
Mailing Address 2715 Countryside Dr	W	0 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23431446
Orono	MN 55356-9675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mayo Clinic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jonathan Wood		Date of Receipt
Mailing Address 1279 Bucher Ave		02 07 2008
City	State Zip Code	Transaction ID: 23431447
Shoreview	MN 55126-8605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Suburban Radiologic Consu- Itants	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00

Π	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associa	name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Dr. Gary Kosel			Date of Receipt
	Mailing Address 15 Meadowlark Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23431449
	Saint Paul	MN	55127-2080	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Consultants Ltd	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Dr. Ellen Abein			Date of Receipt
	Mailing Address 4801 W. 81st Street Suite 108			0 2 D D D D D D D D D D D D D D D D D D
	City	State	Zip Code	Transaction ID: 23431483
	Minneapolis	MN	55437-1111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Suburban Radiologic Consu- Itants, Ltd.	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Dr. Keith Ferguson			Date of Receipt
	Mailing Address 4211 Winding Vine Ct			02 08 2008
	City	State	Zip Code	Transaction ID: 23437420
	Brandon	FL	33511-3015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of West Florida	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Benorts and	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 23 / 68 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset	the name and address of any political committee to	solicit contributions from such committee.
/ Full Name (Last, First, Middle Initial) Dr. David Riggans		Date of Receipt
Mailing Address 3692 El cordero Rar	nch Springs Rd	02 08 2008
City	State Zip Code	Transaction ID: 23439671
Martinez	GA 30907-4952	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University of Kansas Med	Occupation Diagnostic Radiologist	
Ctr Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. John AufderHeide		Date of Receipt
Mailing Address 2616 A Fond du Lac	Rd	M M / D D / Y Y Y Y Y O S O S O S O S O S O S
City	State Zip Code	Transaction ID: 23439672
Oshkosh	WI 54902-7221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Radiology Assoc of Fox Va- lley	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. E Michael Donner, III		Date of Receipt
Mailing Address Northshore Imaging PO Box 9090	Assoc, LLC	02 08 2008
City	State Zip Code	Transaction ID: 23439673
Mandeville	LA 70470-9090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Northshore Imaging Assoc, LLC	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 68 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Henry Wang Mailing Address 12 Coach Side Ln			Date of Receipt
City	State	Zip Code	0 2 0 8 2 0 0 8 Transaction ID: 23439674
Pittsford FEC ID number of contributing federal political committee.	C	14534-9413	Amount of Each Receipt this Period 250.00
Name of Employer Univ of Rochester Medical Ctr Receipt For: Primary General Other (specify)		n cic Radiologist e Year-to-Date ▼ 250.00	1
Full Name (Last, First, Middle Initial) Dr. Devika Jajoo Mailing Address 5 Lois Dr	0 0		Date of Receipt
City	State	Zip Code	0 2 0 8 2 0 0 8 Transaction ID: 23439678
Woodbridge FEC ID number of contributing federal political committee.	C	06525-2047	Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. William Jones	I		Date of Receipt
Mailing Address 525 E. Crescent Mo	oon Dr		0 2 1 5 2 0 0 8
City Oro Valley	State AZ	Zip Code 85755-4770	Transaction ID: 23569697 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03/33-4770	250.00
Name of Employer Arlington Rad Medical Grp Inc		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any per the name and address of any political committee ociation	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Sloves Mailing Address Vista Diagnostic Ce 25 McCabe Dr City Reno FEC ID number of contributing federal political committee.	State Zip Code NV 89511-5991	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Holy Cross Hospital Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. John Lohnes, JR Mailing Address Wichita Radiologica PO Box 8903	<u> </u>	Date of Receipt M
City	State Zip Code	Transaction ID: 23569715
Wichita FEC ID number of contributing federal political committee.	KS 67208-0903	Amount of Each Receipt this Period 250.00
Name of Employer Wichita Radiological Group PA Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. William Fife Mailing Address 256 NW Pacific Gro	I Dr	Date of Receipt
	We Di	02 15 2008
City	State Zip Code	Transaction ID: 23569716
Beaverton FEC ID number of contributing federal political committee.	OR 97006-8352	Amount of Each Receipt this Period 250.00
Name of Employer LAC/USC Hospital	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation	
Full Name (Last, First, Middle Initial) Dr. William Landrum Mailing Address Mountain Home Radiol	lam: Carraul	Date of Receipt
Mailing Address Mountain Home Radiol PO Box 2008		02 15 2008
City	State Zip Code	Transaction ID: 23570246
Mountain Home FEC ID number of contributing federal political committee.	AR 72654-2008	Amount of Each Receipt this Period 365.00
Name of Employer Mountain Home Radiology Consultants Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 365.00	
Full Name (Last, First, Middle Initial) Dr. James Duncan, JR Mailing Address 611 Weymouth Dr		Date of Receipt
		02 15 2008
City	State Zip Code	Transaction ID: 23570267
Spartanburg	SC 29302-2813	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Greenville Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. William Wahl		Date of Receipt
Mailing Address 3137 Marlin Dr		0 2 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23570268
Longmont	CO 80503-7892	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Rocky Mountain Medical Im-	Occupation Diagnostic Radiologist	
aging Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00]
SUBTOTAL of Receipts This Page (optional)		1115.00
TOTAL This Period (last page this line number	·	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	ciation		
Α.	Full Name (Last, First, Middle Initial) Dr. Leonard Berlin Mailing Address 518 Meadow Dr W			Date of Receipt
	City	State	Zip Code	02 15 2008
	Wilmette	IL	60091-2276	Transaction ID: 23570269 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self-employed	Occupation	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Anita Klaus	<u> </u>		Date of Receipt
	Mailing Address 5520 Sandstone Way			02 15 2008
	City	State	Zip Code	Transaction ID: 23570271
	Fayetteville	NY	13066-9684	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer anitaklaus@cs.com	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		250.00	
 >.	Full Name (Last, First, Middle Initial) Dr. Satish Patel			Date of Receipt
	Mailing Address 695 Lantern Hill Rd			0 2 1 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 23570272
	Shavertown FEC ID number of contributing federal political committee.	C	18708-9589	Amount of Each Receipt this Period 250.00
	Name of Employer WVRA	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 68 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	d Statements may not be sold or used by any perso the name and address of any political committee to ociation	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Glenn Tuckman Mailing Address 6416 Shamel Dr City Indianapolis	State Zip Code IN 46278-1170	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Summit Radiology Services, LLC Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Dr. Brian Meagher Mailing Address 204 Sanbury Rd City Jamestown FEC ID number of contributing federal political committee. Name of Employer Oswego Hospital Receipt For: Primary General Other (specify)	State Zip Code NY 14701-9474 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Joseph Alenghat Mailing Address 3901 W Talus Ct City Peoria FEC ID number of contributing federal political committee. Name of Employer Mercy Hospital Receipt For: Primary General Other (specify)	State Zip Code IL 61615-8957 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional))	1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 68 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. David Rodibaugh Mailing Address 1 Saint Raphael	Chata	7'o Oodo	Date of Receipt 0 2 1 5 2 0 0 8
City <u>Laguna Niguel</u> FEC ID number of contributing federal political committee.	State CA	Zip Code 92677-2761	Transaction ID: 23570277 Amount of Each Receipt this Period 250.00
Name of Employer Santa Ana Tustin Radiology Group Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Shaer Mailing Address 704 Castlewood Dri	ive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23652646
<u>Dresher</u>	PA	19025-2014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Deanes Hospital		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Michael Hertzog	•		Date of Receipt
Mailing Address 5404 Summerfield I	Ln		02 28 2008
City	State	Zip Code	Transaction ID: 23652648
Signal Mountain FEC ID number of contributing federal political committee.	C	37377-2860	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Group of Chatta- nooga Receipt For:		ic Radiologist	
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	J(l		750.00

ny information copied from such Reports and S		ich category of the led Summary Page	X 11a 11b 11c 12 13 14 15 16 17
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	name and address of a	any political committee to so	olicit contributions from such committee.
Dr. Gregory Weaver	2		Date of Receipt 0 2 2 8 2 0 0 8
City	•		Transaction ID: 23652650 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	.03-1031	300.00
Name of Employer Radiology Alliance Receipt For: Primary General Other (specify)	. ' 		
Full Name (Last, First, Middle Initial) Dr. Scott Truhlar Mailing Address PO Box 10191			Date of Receipt 0 2 2 8 2 0 0 8
City Iowa City FEC ID number of contributing federal political committee.	•		Transaction ID: 23652652 Amount of Each Receipt this Period 2501.00
Name of Employer Radiologic Medical Servic- es, P.C. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, '		
Full Name (Last, First, Middle Initial) Dr. Charles Williams Mailing Address 456 Carr Ln			Date of Receipt
City Tallahassee			0 2 2 8 2 0 0 8 Transaction ID: 23653113 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Tallahassee Receipt For: Primary General Other (specify)			1000.00
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ Full Name (Last, First, Middle Initial) Dr. Gregory Weaver Mailing Address 210 25th Ave N Ste 60 City Nashville FEC ID number of contributing federal political committee. Name of Employer Radiology Alliance Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Scott Truhlar Mailing Address PO Box 10191 City Iowa City FEC ID number of contributing federal political committee. Name of Employer Radiologic Medical Services, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Charles Williams Mailing Address 456 Carr Ln City Tallahassee FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Tallahassee Receipt For: Primary General Odeneral Name of Employer Radiology Associates of Tallahassee Receipt For: Primary General	NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Gregory Weaver Mailing Address 210 25th Ave N Ste 602 City State Zip Nashville TN 372 FEC ID number of contributing federal political committee. Name of Employer Radiology Aliance Full Name (Last, First, Middle Initial) Dr. Scott Truhlar Mailing Address PO Box 10191 City State Zip Iowa City IA 522 FEC ID number of contributing federal political committee. Name of Employer Radiologic Medical Services, P.C. Receipt For: Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Scott Truhlar Mailing Address PO Box 10191 City State Zip Iowa City IA 522 FEC ID number of contributing federal political committee. Cupation Diagnostic Radio Diagnostic Radio Aggregate Year-to- Diagnostic Radio Aggregate Year-to- Diagnostic Radio Aggregate Year-to- Diagnostic Radio City State Zip Tallahassee FL 323 FEC ID number of contributing federal political committee. City State Zip Tallahassee FL 323 FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Ialahassee FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Ialahassee Receipt For: Aggregate Year-to- Diagnostic Radio	American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Gregory Weaver Mailing Address 210 25th Ave N Ste 602 City State Zip Code TN 37203-1631 FEC ID number of contributing federal political committee. Name of Employer Radiology Alliance Primary General Other (specify) ▼ Cuty State Zip Code Tallahassee Cuty State Zip Code In Aggregate Year-to-Date ▼ State Zip Code In State Zip Code

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 68 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Dr. Kurt Tech		Date of Receipt
Mailing Address 84 Stephens Rd		02 28 2008
City	State Zip Code	Transaction ID: 23653115
Grosse Pointe Farm	MI 48236-3625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer William Beaumont Hospital	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Charles Mulry		Date of Receipt
Mailing Address St Johns Health Care 2015 Jackson St	e Corp	02 / 28 / 2008
City	State Zip Code	Transaction ID: 23653116
Anderson	IN 46016-4337	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer Madison County Imaging	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Dr. Cathleen Woomert		Date of Receipt
Mailing Address 81 Maple Ridge Rd		02 / 28 / 2008
City	State Zip Code	Transaction ID: 23653344
Millville	PA 17846-8933	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer Geisinger Clinic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)	>	6365.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 68 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any persor the name and address of any political committee to sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kenneth Rall		Date of Receipt
Mailing Address 1415 Overhill Rd		02 28 2008
City	State Zip Code	Transaction ID: 23653345
Columbia	MO 65203-1524	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Anthony Jennings		Date of Receipt
Mailing Address Clear Lake Regiona 500 Medical Center		02 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23653348
Webster	TX 77598-4220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Humana Hospital Clear Lake	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Richard Stiles		Date of Receipt
Mailing Address 2461 Fawn Ridge		02 28 2008
City	State Zip Code	Transaction ID: 23653349
Stone Mountain	GA 30087-1213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Atlanta Radiology Consult- ants, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)	1250.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 68 (check only one) X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) merican College of Radiology Assoc	e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ma	Ill Name (Last, First, Middle Initial) . James Tallman ailing Address 1054 Greymont Cir N\	N		Date of Receipt 0 2 2 8 2 0 0 8
Cit		State	Zip Code	Transaction ID: 23659205
FE	arietta C ID number of contributing deral political committee.	GA C	30064-1330	Amount of Each Receipt this Period 250.00
	exame of Employer uantum Radiology exceipt For: Primary General Other (specify)	, i – · –	tic Radiologist e Year-to-Date ▼ 250.00]
<u>Dr</u>	Ill Name (Last, First, Middle Initial) . Jay Harolds ailing Address 14421 Wilson Rd	1		Date of Receipt 0 2 2 8 2 0 0 8
Cit	ty	State	Zip Code	Transaction ID: 23659206
	dmond	OK	73013-1510	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
Na Ba	ame of Employer aptist Medical Center	Occupation Diagnost	n tic Radiologist	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
	III Name (Last, First, Middle Initial) . Gustavo Villarreal, JR			Date of Receipt
Ma	ailing Address 261 Stone Creek Cir			02 28 2008
Cit		State	Zip Code	Transaction ID: 23659207
FE	c Gregor C ID number of contributing deral political committee.	C	76657-3943	Amount of Each Receipt this Period 365.00
<u>P/</u>		Occupation Diagnost	n tic Radiologist	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 365.00	
SUB	TOTAL of Receipts This Page (optional)			865.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any person the name and address of any political committee to s sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Monte Golditch		Date of Receipt
Mailing Address 7 Broadmoor Ave		0 2 2 8 2 0 0 8
City	State Zip Code	Transaction ID: 23659208
Colorado Springs	CO 80906-3641	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. James King, III	I	Date of Receipt
Mailing Address 4004 Iroquois Aven	nue	0 2 2 8 2 0 0 8
City	State Zip Code	Transaction ID: 23659209
Nashville	TN 37205-3828	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advanced Diagnostic Imagi- ng	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Ethan Foxman		Date of Receipt
Mailing Address 1047 N Main St		0 2 2 8 2 0 0 8
City	State Zip Code	Transaction ID: 23660179
West Hartford	CT 06117-2055	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	260.00
Name of Employer Jefferson Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	
SUBTOTAL of Receipts This Page (optional	al)	1010.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any persor and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associ	iation	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Williams Mailing Address 1911 Beechwood Ave		Date of Receipt
Mailing Address 1911 Beechwood Ave City	State Zip Code	0 2 2 8 2 0 0 8 Transaction ID: 23660181
Nashville	TN 37212-5403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer Advanced Diagnostic Imagi- ng	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Dr. Paul Radecki		Date of Receipt
Mailing Address 1 Great Elm Ct		02 28 7 2008
City	State Zip Code	Transaction ID: 23660182
Potomac	MD 20854-1228	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Alan D. Chan		Date of Receipt
Mailing Address 18875 164th AVE NE		02 29 2008
City	State Zip Code	Transaction ID: 23737164
Woodinville	WA 98072-6405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	800.00
Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)		1415.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Dr. Joseph DeMartini		Date of Receipt
Mailing Address PO Box 85398	Obaha 7in Oada	02 29 2008
City Seattle	State Zip Code WA 98145-1398	Transaction ID: 23737165
FEC ID number of contributing federal political committee.	C 30143-1390	Amount of Each Receipt this Period 350.00
Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Virginia Eschbach		Date of Receipt
Mailing Address 2410 141St PI SE		02 29 7 2008
City	State Zip Code	Transaction ID: 23737166
Mill Creek	WA 98012-1336	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Scott Vanderheiden		Date of Receipt
Mailing Address 4705 220th St SW		02 29 2008
City	State Zip Code	Transaction ID: 23737214
Mountlake Terrace FEC ID number of contributing federal political committee.	WA 98043-4052	Amount of Each Receipt this Period 350.00
Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1700.00
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37/68 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Ass		· · ·	
Full Name (Last, First, Middle Initial) Dr. Albert S. Alexander			Date of Receipt
Mailing Address 3612 Foxcroft Rd			02 29 2008
City Little Rock	State AR	Zip Code 72227-2333	Transaction ID: 23737281 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		555.00
Name of Employer Radiology Associates, P.A.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 555.00	
Full Name (Last, First, Middle Initial) Dr. Jodi Barboza			Date of Receipt
Mailing Address 111 Courts Ln			02 29 2008
City Little Rock	State AR	Zip Code 72223-9018	Transaction ID: 23737284 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	72225 3010	555.00
Name of Employer Radiology Associates, P.A.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 555.00	
Full Name (Last, First, Middle Initial) Dr. Benjamin Bartnicke			Date of Receipt
Mailing Address 10 Chambord Ln			02 29 2008
City	State	Zip Code	Transaction ID: 23737286
Little Rock FEC ID number of contributing federal political committee.	AR C	72223-5945	Amount of Each Receipt this Period 555.00
Name of Employer Radiology Associates PA	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 555.00	
SUBTOTAL of Receipts This Page (optional			1665.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associ	ciation	
Full Name (Last, First, Middle Initial) Dr. Michael F. Berry Mailing Address 4068 Caerleon Dr		Date of Receipt
City	State Zip Code	0 2 2 9 2 0 0 8 Transaction ID: 23737287
Bentonville	AR 72712-7651	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	900.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name (Last, First, Middle Initial) Dr. Gordon Chitwood, JR		Date of Receipt
Mailing Address 3208 NW Avignon W	•	02 29 7 2008
City	State Zip Code	Transaction ID: 23737289
<u>Bentonville</u>	AR 72712-3916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Steven Dunnagan		Date of Receipt
Mailing Address 150 Hickory Creek Ci	r	02 / 29 / 2008
City	State Zip Code	Transaction ID: 23737290
Little Rock	AR 72212-2511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		1900.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	and Statements may not be sold or used by any persong the name and address of any political committee to association	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jonathan Fravel Mailing Address Radiology Associa 500 S University A	Ave Ste 101	Date of Receipt 0 2 2 9 2 0 0 8
City	State Zip Code	Transaction ID: 23737317
Little Rock	AR 72205-5399	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Getzoff Mailing Address 501 S. Glenwood		Date of Receipt
Mailing Address 501 S. Glenwood		02 29 2008
City	State Zip Code	Transaction ID: 23737318
Columbia	MO 65203-2762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	555.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00	
Full Name (Last, First, Middle Initial) Dr. James Minor Gregory		Date of Receipt
Mailing Address 23 Hickory Creek	Dr	02 29 7 2008
City	State Zip Code	Transaction ID: 23737319
Little Rock	AR 72212-2509	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	nal)	1055.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 68 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Charles Jeffery Mailing Address Radiology Associat 500 S University Av		7'in Code	Date of Receipt M
Little Rock FEC ID number of contributing federal political committee.	AR C	Zip Code 72205-5324	Transaction ID: 23737320 Amount of Each Receipt this Period 500.00
Name of Employer Radiology Associates, P.A. Receipt For: Primary General Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Don Kusenberger Mailing Address 57 Chenal Cir	.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23737321
Little Rock	AR	72223-9567	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates, P.A.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Melanie Hoover	•		Date of Receipt
Mailing Address Radiology Associat 500 S University Av	/e Ste 101	7.0.1	02 29 2008
City Little Rock	State AR	Zip Code 72205-5314	Transaction ID: 23737322 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	72200 0014	420.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnost	ⁿ ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page (optional	I		1170.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 68 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As:	nd Statements may not be sold or used by any pers g the name and address of any political committee to sociation	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James McDonald Mailing Address 12 Sherrill Rd	Ctata 7in Coda	Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Little Rock	State Zip Code AR 72202-1516	Transaction ID: 23737323 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	555.00
Name of Employer Radiology Associates, P.A. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 555.00	
Full Name (Last, First, Middle Initial) Dr. John Meadors Mailing Address Radiology Associat 500 S University Av		Date of Receipt 0 2 2 9 2 0 0 8
City	State Zip Code	Transaction ID: 23737324
Little Rock	AR 72205-5314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Terrence Oddson	-	Date of Receipt
Mailing Address 10780 Rivercrest D		02 29 7 2008
City	State Zip Code	Transaction ID: 23737325
Little Rock FEC ID number of contributing federal political committee.	AR 72212-1408	Amount of Each Receipt this Period 500.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of December This December (antion)	al)	1555.00

Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associately Paylor Full Name (Last, First, Middle Initial) Dr. Rogerich Paylor Mailing Address 6 Aldridge Ct City	e name and ad	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee. Date of Receipt
Dr. Rogerich Paylor Mailing Address 6 Aldridge Ct City	State		Date of Receipt
		Zip Code	0 2 2 9 2 0 0 8 Transaction ID: 23737326
Little Rock FEC ID number of contributing federal political committee.	AR	72223-9023	Amount of Each Receipt this Period 610.50
Name of Employer Radiology Associates, P.A. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, '	tic Radiologist e Year-to-Date ▼ 610.50	
Full Name (Last, First, Middle Initial) Dr. Jonathan Perry Mailing Address 27 Margeaux Dr			Date of Receipt 0 2 2 9 2 0 0 8
City	State	Zip Code	Transaction ID: 23737327
Little Rock	AR	72223-8906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		555.00
Name of Employer Radiology Associates, P.A.		tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 555.00]
Full Name (Last, First, Middle Initial) Dr. David Phelan	•		Date of Receipt
Mailing Address 4340 Emerald Garden	Rd		02 29 2008
City	State	Zip Code	Transaction ID: 23737328
<u>Conway</u>	AR	72034-8268	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Radiology Associates, P.A.	, ' 	tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional)			1415.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology A	ssociation	
Full Name (Last, First, Middle Initial) Dr. Rajesh Sethi		Date of Receipt
Mailing Address 13500 Chenal Pk	wy Apt 1712	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23737329
Little Rock	AR 72211-5322	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Kathleen Sitarik		Date of Receipt
Mailing Address Radiology Associ 500 S University		02 29 2008
City	State Zip Code	Transaction ID: 23737330
Little Rock	AR 72205-5302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Radiology Associates PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Dr. Shannon Turner	I	Date of Receipt
Mailing Address 40 Bellegarde Dr		02 29 2008
City	State Zip Code	Transaction ID: 23737331
Little Rock	AR 72223-9185	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optic	onal)	1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 68 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Samuel Hill, IV Mailing Address 1860 Houndsfield D	r		Date of Receipt
City Florence	State SC	Zip Code 29506-8552	Transaction ID: 23744005 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Florence Radiological Associates, P.A. Receipt For: Primary General Other (specify) ▼		n cic Radiologist e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Hugo Falcon, JR Mailing Address 412 Herrington Dr N	IE.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23744006
<u>Atlanta</u>	GA	30342-3822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Diagnostic Imaging Specia- lists		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Rizvan Mirza	'		Date of Receipt
Mailing Address 210 Wall St Apt 250)7		02 29 2008
City	State	Zip Code	Transaction ID: 23744007
Seattle	WA	98121-3455	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radia, Inc.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 68 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Christopher McManus Mailing Address 304 Spaulding Fari	m Rd		Date of Receipt
City Greenville FEC ID number of contributing	State SC	Zip Code 29615-6025	0 2 2 9 2 0 0 8 Transaction ID: 23744008 Amount of Each Receipt this Period 250.00
Name of Employer Wake Forest Univ School of Med Receipt For: Primary General Other (specify)	Occupation Diagnost	n ic Radiologist e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Steven Miller Mailing Address 23 Moffat Rd			Date of Receipt 0 2 2 9 2 0 0 8
City	State	Zip Code	Transaction ID: 23744120
Waban FEC ID number of contributing federal political committee.	C	02468-1112	Amount of Each Receipt this Period 250.00
Name of Employer Newton Wellesley Hosp	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Michael Raskin			Date of Receipt
Mailing Address 144 N Sewalls Poir	nt Rd		02 29 2008
City	State	Zip Code	Transaction ID: 23744121
Sewalls Point FEC ID number of contributing federal political committee.	FL C	34996-6502	Amount of Each Receipt this Period 250.00
Name of Employer Michael M. Raskin, P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)		750.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 68 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation		
Full Name (Last, First, Middle Initial) Dr. Mark Yuhasz			Date of Receipt
Mailing Address Tacoma Radiological A PO Box 1535	Associates		02 29 7 2008
City	State	Zip Code	Transaction ID: 23744122
Tacoma	WA	98401-1535	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Tacoma Radiology Associat- es	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. Shane Kraske			Date of Receipt
Mailing Address 37 Columbine Ct			0 2 2 9 2 0 0 8
City	State	Zip Code	Transaction ID: 23744123
lowa City	<u>IA</u>	52246-8716	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiologic Medical Servic- es, Coralvill	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary ☐ General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen	<u> </u>		Date of Receipt
Mailing Address 6612 Cliffbrook Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23744126
Dallas	TX	75254-8613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Southwest Imaging & Inter- ven specialis	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1		1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 68 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Curtis Poor Mailing Address 2415 Eagle Cir	0	7:01	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bettendorf FEC ID number of contributing federal political committee.	State IA	Zip Code 52722-6202	Transaction ID: 23744261 Amount of Each Receipt this Period 250.00
Name of Employer Radiology Group PC SC Receipt For: Primary General Other (specify) ▼		c Radiologist Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Marcela Bohm-Velez Mailing Address Weinstein Imaging 5850 Centre Ave			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pittsburgh FEC ID number of contributing	State PA	Zip Code 15206-3780	Transaction ID: 23744293 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) ▼	1 '	c Radiologist Year-to-Date ▼	166.67
Full Name (Last, First, Middle Initial) Dr. Pedro Vieco Mailing Address 13911 185th Ct NE			Date of Receipt
City	State	Zip Code	0 2 2 9 2 0 0 8 Transaction ID: 23744381
Woodinville FEC ID number of contributing federal political committee.	C	98072-6588	Amount of Each Receipt this Period 1000.00
Name of Employer Radia, Inc.	Occupation Diagnosti	c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	J)		1416.67
TOTAL This Period (last page this line num	ber only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 68 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mane name and ad	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation		
۸.	Full Name (Last, First, Middle Initial) Dr. Carl Bailey, JR	J		Date of Receipt
	Mailing Address 710 Bunkers Cove R			02 111 2008
	City Panama City	State FL	Zip Code 32401-3920	Transaction ID: 23909571 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02-101 0020	200.00
	Name of Employer Bay Radiology Associates	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Lloyd Logue			Date of Receipt
	Mailing Address 3943 Indian Springs	Rd		02 11 2008
	City	State	Zip Code	Transaction ID: 23909572
	Panama City FEC ID number of contributing federal political committee.	FL C	32404-5794	Amount of Each Receipt this Period 200.00
	Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Gregory Presser			Date of Receipt
	Mailing Address 706 Bunkers Cove R	d		0 2 1 1 2 0 0 8
	City	State	Zip Code	Transaction ID: 23909573
	Panama City FEC ID number of contributing federal political committee.	FL C	32401-3920	Amount of Each Receipt this Period 200.00
	Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	_, '	e Year-to-Date ▼ 400.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		600.00

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PAGE 49 / 68 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Date of Receipt Dr. Scott Ramey Mailing Address Bay Radiology Assoc PA 02 11 2008 PO Box 1770 City State Zip Code Transaction ID: 23909574 Panama City FI 32402-1770 Amount of Each Receipt this Period FEC ID number of contributing 200.00 C federal political committee. Name of Employer Bay Radiology Associates, Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Dr. James Strohmenger Date of Receipt Mailing Address 2818 Canal Dr 0 2 11 2008 City State Zip Code Transaction ID: 23909575 Panama City FL 32405-1610 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Bay Radiology Associates Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date ▼ Primary General

400.00

SUBTOTAL of Receipts This Page (optional)	•	400.00
TOTAL This Period (last page this line number only)	•	53323.17

Other (specify)

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SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 68 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
	Statements may not be sold or used by any person he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Vanguard Mailing Address PO Box 13750		Date of Receipt 0 2 2 0 0 8
City	State Zip Code	Transaction ID: 23909562
Philadelphia	PA 19101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	806.63
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1789.86	Interest

SUBTOTAL of Receipts This Page (optional)	•	 806.63
TOTAL This Period (last page this line number only)	<u> </u>	806.63

	PHEDOLE B (FEC FOIII	•	Use separate schedule(s)				(check or		(S) (check				:H:		L	PAGE	51/6	08
	EMIZED DISBURSEME		Detailed	category of the Summary Page		À	21b 27	22 28a	Х	23 28b	-	8c	25 29					
	r Information copied from such Repor or commercial purposes, other than u													3				
\setminus	NAME OF COMMITTEE (In Full) American College of Radiology																	
	Full Name (Last, First, Middle Initial) Reynolds For Congress							Date		sburs	ement	0937		Y				
	Mailing Address PO Box 1538 Pittsford	8						0 ^M 2			1		ž 0 ŏ 8	3				
	City Rochester		State NY	Zip Code 14615				Amou	ınt of	Each	Disbu		nt this F					
	Purpose of Disbursement					01 ⁻				•		2	000.00	J				
	Candidate Name Rep. Thomas M. Reynolds					ateg Typ	•											
	Office Sought: X House Senate President	Disburse	ment For: Primary Other (spe	2008 X General ecify) ▼														
	State: NY District: 26 Full Name (Last, First, Middle Initial)							Trans	saoti.	on ID:	221	0937	2					
	Reynolds For Congress										ement			Υ				
	Mailing Address PO Box 1538 Pittsford	8						0 2			1		ž 0 ŏ 8	3				
	City Rochester		State NY	Zip Code 14615				Amou	ınt of	Each	Disbu		nt this F					
	Purpose of Disbursement					01 ⁻				_		3	000.00	0				
	Candidate Name Rep. Thomas M. Reynolds					ateg Typ	•											
	Office Sought: X House Senate President		ment For: Primary Other (spe	2008 General														
	State: NY District: 26 Full Name (Last, First, Middle Initial)							Trans	sacti	on ID:	231	0941	2					
	Charles A Gonzalez Congression	onal Campa	ign								ement	Y	ΥΥΥ	Υ				
	Mailing Address PO Box 1261	2						0 ^M 2			6 /	. :	ž 0 ŏ 8	3				
	City San Antonio		State TX	Zip Code 78212				Amou	ınt of	Each	Disbu	rseme	nt this F	Perio				
	Purpose of Disbursement					01		L.				2	000.00	0				
	Candidate Name Rep. Charles A. Gonzalez				Ca	ateg Typ	ory/											
	Office Sought: X House Senate President State: TX District: 20	Disburse	ment For: Primary Other (spe	2008 X General ecify) ▼														
	Sidio. 17. District. 20	ge (optional) .											00.00					

	CHEDULE B (FEC Form 3X)		ate schedule(s)	_	INE NUMBER: only one)	PAGE 52 / 68
	EMIZED DISBURSEMENTS	Detailed S	ategory of the ummary Page	21k	22 X 23 28a 28b	24 25 29 29 29
	Information copied from such Reports and Stater or commercial purposes, other than using the name					
$\overline{\ }$	NAME OF COMMITTEE (In Full) American College of Radiology Association		, р			
	Full Name (Last, First, Middle Initial) Leadership Empowerment & Development	PAC (LEA	D PAC)		Transaction ID: Date of Disburse	
	Mailing Address PO BOX 12073				02 0	6 2008
	City SAN ANTONIO	State TX	Zip Code 78212		Amount of Each	Disbursement this Perio
	Purpose of Disbursement Candidate Name			011]	5000.00
	Leadership Empowerment & Development	t PAC (LEAI	D PAC)	Category/ Type		
	Senate President State: District:	Primary Other (spec	General ▼			
	Full Name (Last, First, Middle Initial) Glacier PAC				Transaction ID: Date of Disburse	
	Mailing Address 818 Connecticut Avenue Suite 1100	Northwest			0 2 M / 0	1 2008
	City Washington	State DC	Zip Code 20006		Amount of Each	Disbursement this Perio
	Purpose of Disbursement Candidate Name			011 Category/]	5000.00
	Glacier PAC			Type		
	Office Sought: House Disburs: Senate President State: District:	ement For: Primary Other (spec	General ify) ▼			
	Full Name (Last, First, Middle Initial) Northstar Leadership Pac				Transaction ID: Date of Disburse	ment
	Mailing Address PO Box 28754				02 2 2	6 2008
	City St. Paul	State MN	Zip Code 55128		Amount of Each	Disbursement this Perio
	Purpose of Disbursement Candidate Name			011]	4000.00
	Northstar Leadership Pac			Category/ Type		
	Senate President	ement For: Primary Other (spec	General			
	State: District:					
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	(FEC Form 3X) BURSEMENTS	for each	arate schedule(s) category of the	(check only	_ ′	PAGE 53 / 68
			Summary Page	21b 27	22 X 23 28a 28b	24 25 28c 29
	I from such Reports and State oses, other than using the nar					
NAME OF COMM American Colle	ITTEE (In Full) ge of Radiology Associati	on				
Full Name (Last, F Democratic Ser	irst, Middle Initial) atorial Campaign Comm	ittee			Transaction ID: Date of Disbursen	
Mailing Address	120 Maryland Avenue N	Northeast			02 06	2008
City Washington		State DC	Zip Code 20002		Amount of Each D	Disbursement this Perio
Purpose of Disburs	sement			011		15000.00
	atorial Campaign Comm			Category/ Type		
Office Sought:	Senate President	Primary Other (sp	General ecify)			
State: Full Name (Last, F	District: irst, Middle Initial)				Transaction ID:	22260702
Tammy Baldwir	•				Date of Disbursen	nent
Mailing Address	P.O. Box 696				02 / 02	2008
City Madison		State WI	Zip Code 53701		Amount of Each D	Disbursement this Period
Purpose of Disburs	sement			011		3000.00
Candidate Name Rep. Tammy Ba	aldwin			Category/ Type		
Office Sought:		sement For: X Primary Other (sp	2008 General ecify)			
Full Name (Last, F Tammy Baldwir	irst, Middle Initial)				Transaction ID: Date of Disbursen	
Mailing Address	P.O. Box 696				$\begin{bmatrix} 0 & 2 & 0 & 2 \\ 0 & 2 & 0 & 2 \end{bmatrix}$	2008
City Madison		State WI	Zip Code 53701		Amount of Each D	isbursement this Perio
Purpose of Disburs	sement			011		5000.00
Candidate Name Rep. Tammy Ba	aldwin			Category/ Type		
Office Sought:	X House Disburs Senate President	Primary Other (sp	2008 X General ecify) ▼			
State: WI	District: 02		*			
						23000.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	_	E NUMBER: PAGE 54 / 68						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 X 23 28a 28b	24 25 26 28c 29 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)	and address of any pointear	CONTINUECC TO SOI	ion continuations	TOTT SUCTI COMMITTEE					
American College of Radiology Association	1								
Full Name (Last, First, Middle Initial) Congressman Waxman Campaign Commi	ttee		Transaction II Date of Disbur	D: 23269803 sement					
Mailing Address 6380 Wilshire Blvd. #161	2		0 2 M	04 7 2008					
,	State Zip Code CA 90048		Amount of Eac	th Disbursement this Period					
Purpose of Disbursement		011		5000.00					
Candidate Name Rep. Henry A. Waxman		Category/ Type							
Senate X President	ment For: 2008 Primary General Other (specify)								
State: CA District: 30									
Full Name (Last, First, Middle Initial) Citizens For Altmire			Date of Disbur						
Mailing Address PO Box 1776			02 /	08 7 2008					
	State Zip Code PA 15042		Amount of Eac	h Disbursement this Period					
Purpose of Disbursement		011		2000.00					
Candidate Name Mr. Jason Altmire		Category/ Type							
Senate X President	ment For: 2008 Primary General Other (specify)								
State: PA District: 04 Full Name (Last, First, Middle Initial)			Tuanaasian II	2- 00414000					
Courtney For Congress			Date of Disbur						
Mailing Address 38 Risley Road			0 2	12 2008					
	State Zip Code CT 06066		Amount of Eac	h Disbursement this Period					
Purpose of Disbursement		011		1000.00					
Candidate Name Rep. Joseph Courtney		Category/ Type							
	ment For: 2008 Primary General Other (specify)								
SUBTOTAL of Disbursements This Page (optional) .			aa _ e	8000.00					
TOTAL This Period (last page this line number only)									

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) (check)		E NUMBER: PAGE 55 / 68
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) American College of Radiology Associati			
Full Name (Last, First, Middle Initial) Jackie Speier For Congress			Transaction ID: 23415969 Date of Disbursement
Mailing Address PO Box 112			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Burlingame	State Zip Code CA 94011		Amount of Each Disbursement this Period
Purpose of Disbursement		011	3000.00
Candidate Name Jackie Speier		Category/ Type	
Senate President	sement For: 2008 K Primary General Other (specify)		
State: CA District: 12 Full Name (Last, First, Middle Initial)			Transcript ID: 00415070
Voice for Freedom			Transaction ID: 23415976 Date of Disbursement
Mailing Address 2451 Cumberland Park	way Suite 326		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Atlanta	State Zip Code GA 30339		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Voice for Freedom		Category/ Type	
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Tuesday Group PAC			Transaction ID: 23415982 Date of Disbursement
Mailing Address P.O. Box 40385			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ D & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & N & N \\ Z & D & N & N \end{bmatrix}$
City Washington	State Zip Code DC 20016		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2000.00
Candidate Name Tuesday Group PAC		Category/ Type	
Office Sought: House Disbur Senate President	sement For: Primary General Other (specify) ▼		
State: District:			
			7500.00

HEDULE B (FEC	-	Use sepa	arate schedule(s)			CK only	NUMBE	n.			AGE	56 / 6	8
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NAME OF COMMITTEE (In American College of Ra	Full)		,,										
Full Name (Last, First, Middl Jim Gerlach For Congre	,	e					Date	of Dis	burse				V
Mailing Address PO Bo	x 87						0 2	M /	0	8 /	2	0 0 8	
City Uwchland		State PA	Zip Code 19480				Amou	int of	Each	Disburs	emen	t this P	erioc
Purpose of Disbursement					011						10	00.00)
Candidate Name Rep. James W. Gerlach	l				itego Type	ry/							
Office Sought: X Hous Sena Presi	te dent	sbursement For: X Primary Other (spe	2008 General										
State: PA District: Full Name (Last, First, Middle)							Trons		- ID:	2341	6007		
Dnc Services Corporation		c National Com	mi				Date		burse	ment			Υ
Mailing Address 430 Se	outh Capitol S	Street Southeas					0 2		2	8 /	. 2	0 ŏ 8	
City Washington		State DC	Zip Code 20003				Amou	int of	Each	Disburs	emen	t this P	erio
Purpose of Disbursement					011		L.		-		150	00.00)
Candidate Name Dnc Services Corporation	on/Democration	c National Com	mi		itego Γype	-							
Office Sought: Hous Sena Presi	te	sbursement For: Primary Other (spe	General ecify) ▼										
Full Name (Last, First, Middl Stupak For Congress	e Initial)						Date	of Dis	burse				
Mailing Address 817 N PO Bo	inth Avenue F x 143	P.O. Box 156					o ^M 2	M /	^D 2	8 /	ž	0 ŏ 8	Y
City Menominee		State MI	Zip Code 49858				Amou	int of	Each	Disburs			-
Purpose of Disbursement					011						10	00.00)
Candidate Name Rep. Bart Stupak				Ca	itego Type								
Office Sought: X Hous Sena Presi State: MI District:	te dent	sbursement For: X Primary Other (spe	2008 General										
STATE INTO THIS HIGH	υι 												

IT	CHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)		NUMBER: PAGE 57 / 68
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	y one) 22 X 23 24 25 28a 28b 28c 29 3
Any	y Information copied from such Reports and Stator commercial purposes, other than using the na	ements may name and addre	not be sold or use	d by any person f	or the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associat		ss of any pointed	recommittee to so	ion contributions from such confinitee
	Full Name (Last, First, Middle Initial) Friends Of Rahm Emanuel				Transaction ID: 23416134 Date of Disbursement
	Mailing Address P.O. Box 101124				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ Z & B \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & B \end{smallmatrix} \end{bmatrix}$
	City Chicago	State IL	Zip Code 60610		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name			011	2500.00
	Rep. Rahm Emanuel	rsement For:	2008	Category/ Type	
	Office Sought: X House Disbute Senate President State: IL District: 05	Primary Other (spe	X General		
	Full Name (Last, First, Middle Initial) Shore PAC				Transaction ID: 23416136 Date of Disbursement
	Mailing Address P.O. Box 3157				$\begin{bmatrix}\begin{smallmatrix}M\\02\end{smallmatrix}\end{bmatrix}^M \begin{smallmatrix}D\\27\end{smallmatrix}\end{bmatrix}^M \begin{smallmatrix}Y\\2008\end{smallmatrix}$
	City Long Branch	State NJ	Zip Code 07740		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	2500.00
	Candidate Name Shore PAC			Category/ Type	
	Office Sought: House Disbu	rsement For: Primary Other (spe	General		
	District.				
	State: District: Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee				Transaction ID: 23423415 Date of Disbursement
	Full Name (Last, First, Middle Initial)				
	Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee	State CA	Zip Code 94537		Date of Disbursement M 2 M / D 2 6 Y 2 0 0 8 Y Amount of Each Disbursement this Period
	Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee Mailing Address P.O. Box 8331 City Fremont Purpose of Disbursement			011	Date of Disbursement O 2 M / D 2 G / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee Mailing Address P.O. Box 8331 City Fremont Purpose of Disbursement Candidate Name Rep. Fortney Peter Stark	CA	94537	011 Category/ Type	Date of Disbursement M 2 M / D 2 6 / Y 2 0 0 8 Y Amount of Each Disbursement this Period
	Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee Mailing Address P.O. Box 8331 City Fremont Purpose of Disbursement Candidate Name Rep. Fortney Peter Stark		94537 2008 X General	Category/	Date of Disbursement M 2 M / D 2 6 / Y 2 0 0 8 Y Amount of Each Disbursement this Period

	CHEDULE B (FEC FOIII 3X)	' Use separate schedule(s)				NUMBE y one)	:K:		L	PAGE	58/	68
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a		23 28b		8c	25 29	
	y Information copied from such Reports and Sta for commercial purposes, other than using the n											8
	NAME OF COMMITTEE (In Full) American College of Radiology Associa	·										
<u>v</u>	Full Name (Last, First, Middle Initial) Committee for Hispanic Causes (CHC I	Bold PAC)				Date	of Dis	burse	ement	2349		
	Mailing Address 1831 Bay Street SE					0 ^M 2	M /	^D 1	4 /	Y 2	ž 0 ŏ 8	3
	City Washington	State Zip Code DC 20003				Amou	ınt of	Each	Disbu		nt this f	-
	Purpose of Disbursement			01	1					1	000.0	0
	Candidate Name Committee for Hispanic Causes (CHC I	<u> </u>		ateg Typ	gory/ pe							
	Senate President	rsement For: Primary General Other (specify) ▼										
	State: District: Full Name (Last, First, Middle Initial) Friends Of Patrick J Kennedy Inc								234 ement	2350	6	
	Mailing Address P.O. Box 321					0 ^M 2	M /	^D 1	3 /	Y	ž 0 č 8	3 Y
	City Pawtucket	State Zip Code RI 02862				Amou	ınt of	Each	Disbu	rseme	nt this I	Period
	Purpose of Disbursement			01	1					3	00.00	0
	Candidate Name Rep. Patrick J. Kennedy		1	ateç Typ	gory/ be							
	Office Sought: X House Senate President State: RI District: 01	rsement For: 2008 X Primary General Other (specify)										
	Full Name (Last, First, Middle Initial) Friends Of John Tanner					Date	of Dis	sburse	ement	2355		
	Mailing Address Post Office Box 1994					0 ^M 2	M /	^D 1	3 /	Y	ž 0 č 8	3
	City Union City	State Zip Code TN 38281				Amou	ınt of	Each	Disbu		nt this f	
	Purpose of Disbursement			01	1	L.	_			1	500.0	0
	Candidate Name Rep. John S. Tanner			ateo Typ	gory/ be							
	Office Sought: X House Disbute Senate President State: TN District: 08	rsement For: 2008 Primary X General Other (specify)										
	Otate. 114 Distillet. 00											

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) (chan		NUMBER: PAGE 59 / 68
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) American College of Radiology Association	n		
Full Name (Last, First, Middle Initial) Herseth For Congress			Transaction ID: 23423554 Date of Disbursement
Mailing Address PO Box 2009			02 13 7 2008
City Sioux Falls	State Zip Code SD 57101		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2000.00
Candidate Name Rep. Stephanie Herseth		Category/ Type	
Senate President	ement For: 2008 Primary X General Other (specify)		
State: SD District: 01 Full Name (Last, First, Middle Initial)			Transaction ID: 23423708
Blue Dog Political Action Committee			Date of Disbursement
Mailing Address 6849 Old Dominion Driv Suite 222	Э		$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} \begin{bmatrix} D & D & D \\ 0 & 0 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City McLean	State Zip Code VA 22101		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name Blue Dog Political Action Committee		Category/ Type	
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Mccollum For Congress			Transaction ID: 23423761 Date of Disbursement
Mailing Address P.O. Box 14131			$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} / \begin{bmatrix} D & 1 & D \\ 1 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & 0 & 0 & 8 \end{bmatrix} $
City St. Paul	State Zip Code MN 55114		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Rep. Betty McCollum		Category/ Type	
Office Sought: X House Disburs Senate President	ement For: 2008 Primary General Other (specify)	NE -	
State: MN District: 04			
SUBTOTAL of Disbursements This Page (optional)		>	9500.00

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s) FOR LINE (check onl	E NUMBER: PAGE 60 / 68
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) American College of Radiology Association			
Full Name (Last, First, Middle Initial) Anna Eshoo For Congress			Transaction ID: 23425395 Date of Disbursement
Mailing Address 555 Capitol Mall Suite	1425		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Sacramento	State Zip Code CA 95814		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1500.00
Candidate Name Rep. Anna G. Eshoo		Category/ Type	
Senate President	sement For: 2008 X Primary General Other (specify)		
State: CA District: 14 Full Name (Last, First, Middle Initial)			
Dave Camp For Congress			Transaction ID: 23425398 Date of Disbursement
Mailing Address 5915 Eastman Ave. S	iite 100		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Midland	State Zip Code MI 48640		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2000.00
Candidate Name Rep. David Lee Camp		Category/ Type	
Senate President	sement For: 2008 X Primary General Other (specify)		
State: MI District: 04 Full Name (Last, First, Middle Initial) Join Our Efforts PAC (Joe PAC)			Transaction ID: 23425410 Date of Disbursement
Mailing Address 610 Harper Avenue			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ D & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & D & D & S \end{bmatrix}$
	State Zip Code PA 19046		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Join Our Efforts PAC (Joe PAC)		Category/ Type	
Office Sought: House Disbur Senate President	sement For: Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional	,		6000.00

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
	y Information copied from such Reports and State or commercial purposes, other than using the nan			
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Association	· ·		
<u> </u>	Full Name (Last, First, Middle Initial) Moran For Congress			Transaction ID: 23425413 Date of Disbursement
	Mailing Address 44 Canal Center Plaza 2 2nd Floor	nd FIr		$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 0 & 2 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{bmatrix} & / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} \\ \end{bmatrix}$
	City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	2500.00
	Candidate Name Rep. James P. Moran		Category/ Type	
	Senate >	ement For: 2008 Primary General Other (specify)		
	State: VA District: 08 Full Name (Last, First, Middle Initial) Texans For Senator John Cornyn Inc			Transaction ID: 23425414 Date of Disbursement
	Mailing Address 6850 Austin Centre Blvd Suite 180			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & D & D & S \end{smallmatrix} \end{bmatrix}$
	City Austin	State Zip Code TX 78731		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	4000.00
	Candidate Name Sen. John Cornyn		Category/ Type	
	X Senate President	ement For: 2008 Primary X General Other (specify)		
	State: TX District: Full Name (Last, First, Middle Initial) Ryan For Congress			Transaction ID: 23425416 Date of Disbursement
	Mailing Address P. O. Box 1919			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & O & D \\ O & O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & O & O & S \\ Z & O & O & S \end{smallmatrix} \end{bmatrix}$
	City Janesville	State Zip Code WI 53547		Amount of Each Disbursement this Perio
	Purpose of Disbursement		011	2000.00
	Candidate Name Rep. Paul Ryan		Category/ Type	
	Office Sought: X House Disburs	ement For: 2008 Primary General Other (specify)		
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1	College of Radiology	Association	1											
	Last, First, Middle Initial) For Senate 2008 Inc Iress 228 S Washir		Suite 11	5						isburs		1254 ⁻	19 2 0 0 8	3 ^Y
City		5	State	Zip Code				Amou	nt o	f Each	Disbu	ırsem	ent this	Period
Alexandri Purpose of	a Disbursement		VA	22314	Г	01	1			-	-		1500.0	0
	ar Alexander					ateg Typ	ory/							
Office Sou	ht: House X Senate President District:	Disburser	ment For: Primary Other (spe	2008 General										
Full Name	Last, First, Middle Initial) opersberger For Cong	ıress						Trans		isburs	ement	1255		
Mailing Add	lress 22 West Pado	onia Road S	uite C-14	1				0 ^M 2	M	/ D 1	^D 2	Y	ž 0 ŏ 8	3 ^Y
City Timonium	1		State MD	Zip Code 21093				Amou	nt o	f Each	Disbu		ent this	
Candidate I	Disbursement Name Ruppersberger					01 ateg	ory/		•	•			1000.0	O
Office Sou		Disburser	ment For: Primary Other (spe	2008 General		Тур	e							
	Last, First, Middle Initial) owski For Us Senate								of Di	isburs	ement		21	
Mailing Add	lress PO Box 1008	47						0 ^M 2	М	/ D 1	^D 2	Υ	žoŏs	3 ^Y
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Candidate I	Disbursement Name Murkowski					01 ateg Typ	ory/			•		•	1000.0	U
Office Sou	X Senate President	Disburser X	ment For: Primary Other (spe	2010 General										
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBE	R:			PA	GE	63 /	68
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		b [only one)		25	□ 26				
	Detailed Guillinary Fage	2		28a		28b		28c		29	30b
Any Information copied from such Reports and State or for commercial purposes, other than using the name											S
NAME OF COMMITTEE (In Full)	io and address of any pointed of				1001	10110 11					
American College of Radiology Association	on										
Full Name (Last, First, Middle Initial) Steve Austria For Congress						on ID		23425 ent	526		
Mailing Address 2537 Obetz Dr				0 2	М	[/] D	0 6	/ Y	ž	0 Ŏ 8	B Y
City Beavercreek	State Zip Code OH 45434			Amou	int o	f Each	n Dis	sburse	men	t this	Period
Purpose of Disbursement	Г.		\neg						25	00.0	0
Candidate Name Mr. Steve Austria		011 Category Type									
X X	ement For: 2008 Primary General Other (specify)	. 7/6-2									
State: OH District: 07											
Full Name (Last, First, Middle Initial) Grassley Committee Inc				Date	of D	isburs	eme	23425 ent	531		
Mailing Address PO Box 1000				0 ^M 2	М	[′]	0 6	/ Y	ž	οŏε	3 ^Y
City Des Moines	State Zip Code IA 50304			Amou	int o	f Each	n Dis	sburse			
Purpose of Disbursement		011		L.					10	0.00	0
Candidate Name Sen. Charles E. Grassley	C	Category Type	7								
Office Sought: House Senate President Disburs	ement For: 2007 Primary X General Other (specify)										
State: IA District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Trans	acti	on ID	: 2	23425	536		
Andre Carson For Congress					_	isburs					_
Mailing Address 2527 North Alabama St	reet			0 ^M 2	М	[′] _ ^D C	7	/ L	ž	0 0 8	3 ^Y
City Indianapolis	State Zip Code IN 46205			Amou	int o	f Each	n Dis	sburse	men	t this	Period
Purpose of Disbursement	Г	044							25	0.00	0
Candidate Name Andre Carson		011 Category Type	/								
Senate President	ement For: 2008 Primary General Other (specify)										
State: IN District: 07 Specia	l-General2008										
SUBTOTAL of Disbursements This Page (optional)			<u> </u>						60	0.00	0

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	GE 64/6	8		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one) 22 X 23 28a 28l		25 29	26 30b
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NAME OF COMMITTEE (In Full)	and address of any pointed so			7110111 00011 0	011111111100	
American College of Radiology Association						
Full Name (Last, First, Middle Initial) Conservative Opportunities for a New Ame	rica PAC (CONA-		Transaction Date of Disbu		681	
Mailing Address 110 W Louisiana Avenue Suite 312			02 4	0 6 / Y	2008	Y
City	State Zip Code TX 79701		Amount of Ea	ach Disburser		
Purpose of Disbursement		011			2500.00	
Candidate Name Conservative Opportunities for a New Ame (CONA-PAC) Office Sought: House Disburse	rica PAC	Category/ Type				
Senate President	ment For: Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) Udall For Colorado			Transaction Date of Disbu	irsement	-	V
Mailing Address PO Box 40158			0 2	0 7	ž 0 0 8	
•	State Zip Code CO 80204		Amount of Ea	ach Disburser		-
Purpose of Disbursement		011			2500.00)
Candidate Name Mr. Mark Udall		Category/ Type				
Office Sought: House X Senate President Disburse X	nent For: 2008 Primary General Other (specify)					
State: CO District:						
Full Name (Last, First, Middle Initial) Senate Victory Fund			Transaction Date of Disbu	ırsement		V
Mailing Address P.O. Box 7274			02 4	13 / Y	ž 0 0 8	
	State Zip Code VIS 38802		Amount of Ea	ch Disburser		
Purpose of Disbursement	I	011			2000.00	
Candidate Name Senate Victory Fund		Category/ Type				
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼					
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	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)			R LINE eck only	NUMBE	R:		_ P	AGE	65 / 6	8
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	22 28a		8b	24 28c		25 29	
	y Information copied from such Reports and State for commercial purposes, other than using the nar											
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Association	on										
<u> </u>	Full Name (Last, First, Middle Initial) Friends Of Connie Mack					Date	action of Disb	urser			V	V
	Mailing Address P.O. Box 60004 Pmb 388					0 2	IVI /	1 1	B /	<u>'</u> 2	0 ŏ 8	
	City Ft. Myers	State Zip Code FL 33906				Amou	nt of E	ach [Disburs			
	Purpose of Disbursement		Г	011						10	00.00	
	Candidate Name Rep. Connie Mack, IV			atego Type	•							
	Senate President	ement For: 2008 Primary General Other (specify)										
	State: FL District: 14 Full Name (Last, First, Middle Initial) John D. Dingell For Congress Committee						action of Disb		23450 nent	0993		
	Mailing Address 607 14th Street N.W. Suite 800					0 ^M 2	M /	^D 1 4	1 /	^Y 2	8 ö́ 0	Υ
	City Washington	State Zip Code DC 20005				Amou	nt of E	ach [Disburs	ement	this P	erio
	Purpose of Disbursement			011						30	00.00	
	Candidate Name Rep. John D. Dingell			atego Type	-							
	Office Sought: X House Senate President State: MI District: 15	ement For: 2008 Primary X General Other (specify)										
	Full Name (Last, First, Middle Initial) Russell For Congress					Date	of Disb	urser				
	Mailing Address PO Box 1103					0 2	М /	^D 1 9	9 /	^Y ^Y 2	0 Ď 8	Y
	City Oxford	State Zip Code MS 38655				Amou	nt of E	ach [Disburs	ement	this P	erio
	Purpose of Disbursement			011		L.				10	00.00)
	Candidate Name Mr. Randy Russell		Ca	atego Type	ory/							
		ement For: 2008 Primary General Other (specify)										
	State: MS District: 01											

Transaction ID: 23601980 City West Chester OH Disbursement Candidate Name Rep. John Boehner Office Sought: X House President Senate President State: OH District: 08 Full Name (Last, First, Middle Initial) Barrett For Congress Mailing Address P.O. Box 869 City Westminster Sc District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) Freesident State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) State: SC District: 03 Full Name (Last, First, Middle Initial) Doggett For Us Congress Mailing Address PO Box 5843 City State Zip Code Amount of Each Disbursement this for Scandidate Name Rep. John Boehner Office Sought: X House Senate President State: SC District: 03 Full Name (Last, First, Middle Initial) Doggett For Us Congress Mailing Address PO Box 5843 City State Zip Code Amount of Each Disbursement this for Scandidate Name Rep. John Boehner Other (specify) ▼ Transaction ID: 23601989 Amount of Each Disbursement this for Scandidate Name Rep. John Boehner Transaction ID: 23601980 Transaction ID: 23	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s) FOR LINE (check onli	NUMBER: PAGE 66 / 68 v one)
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IT	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENT	for each category of the Detailed Summary Page	(check only) 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports a for commercial purposes, other than using			for the purpose of soliciting contributions plicit contributions from such committee
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology As	sociation		
	Full Name (Last, First, Middle Initial) Marion Berry For Congress Mailing Address P.O. Box 8084			Transaction ID: 23749377 Date of Disbursement
	City Jonesboro Purpose of Disbursement	State Zip Code AR 72403	011	Amount of Each Disbursement this Period 1000.00
	Candidate Name Rep. Marion Berry		Category/ Type	
	Office Sought: X House Senate President State: AR District: 01	Disbursement For: 2008 X Primary General Other (specify)	l	

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)		141500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page FOR LIN (check or 21b 27	E NUMBER: PAGE 68 / 68 lly one) 22 23 24 25 26 28a 28b 28c X 29 30b
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political committee to s	
American College of Radiology Association Full Name (Last, First, Middle Initial)		
Bank of America Mailing Address P.O. Box 27025		Transaction ID: 23909576 Date of Disbursement O 2 M / D 2 D / Y 2 0 0 8
	State Zip Code VA 23261-7025	Amount of Each Disbursement this Period 927.47
Bank Fees Candidate Name	001 Category/ Type	
Office Sought: House Senate President State: District:	**	Bank Fees

SUBTOTAL of Disbursements This Page (optional)	•	927.47
TOTAL This Period (last page this line number only)	—	927.47